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Items of Interest:

Navy Senior Chief Receives National Latina Symposium Meritorious Service Award. On September 7, 2006 Navy Senior Chief Hospital Corpsman, Aviation Warfare/ Parachutist Jumper (AW/PJ) Irene Rivera was awarded the 2006 National Latina Symposium Meritorious Service Award from Captain Kathlene Contres, winner of the 2005 Latina Symposium Meritorious Service Award and Mr. Robert E Bard, President of Latina Style Magazine. The event marked the third annual National Latina Symposium Meritorious Service Award Luncheon hosted by Latina Style Magazine to recognize outstanding achievements of Latina women serving in the armed forces.

Navy and Marine Corps Medical News

A Public Affairs Publication of the Bureau of Medicine and Surgery

'Fighting the Crud': Naval Health Research Center Kicks off Vaccine Trials to Stop Boot Camp Adenovirus

By Larry Coffey, Navy Medicine Support Command Public Affairs Office

NAVY RECRUIT TRAINING COMMAND GREAT LAKES –

Phases two and three of the Food and Drug Administration (FDA) approved trials of a drug developed to stop the traditional "boot camp crud" began Oct. 7 and could eventually reduce illness in as many as 1/5 of Sailors entering the Navy.

"The adenoviral illness is caused by viral pathogens, or germs, that can make Sailors sick," said Cmdr. Kevin Russell, a medical epidemiologist from the Naval Health Research Center (NHRC) in San Diego and the Navy's lead physician overseeing the Navy's portion of the Army led joint Army-Navy trials.

To ensure safety and effectiveness, several studies, or "trials," must be conducted before the vaccine is licensed by the FDA. Phase one saw 58 volunteer Army medics as subjects and was completed in 2004. Russell said phases two and three should be complete in late 2007.

"Careful FDA-licensing trials take many years," Russell explained. "The adenovirus vaccine trials are on an accelerated schedule. Use of vaccines in all recruits may begin in 2009."

Russell said an estimated 10-20% of all recruits lose some time from training due to adenoviral illness.

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INDIAN OCEAN - Lt. Cmdr. Gordon Wisbach, Fleet Surgical Team 5's lead surgeon, performs surgery aboard the amphibious assault ship USS Boxer (LHD 4) Oct. 10. *U.S. Navy photo by Mass Communication Specialist Seaman Paul Polach*

DoD Resumes Mandatory Anthrax Vaccinations

By Jim Garamone, American Forces Press Service

WASHINGTON - The Department of Defense (DoD) will resume mandatory anthrax inoculations for service members and civilians deploying to U.S. Central Command and Korea, DoD officials said Oct. 16.

The six-shot series provides immunity from a deadly disease that has been used as a biological attack agent, said Dr. William Winkenwerder, assistant secretary of defense for health affairs.

A small number of service members assigned to homeland defense units will also receive the shots.

David S.C. Chu, undersecretary of defense for personnel and readiness, will issue instructions to the services in the next two months. The program will start soon after.

A court order halted mandatory vaccinations in 2004. In 2005, the order was lifted, and service members deploying to the area or in special units could choose to receive the vaccinations or not. Roughly 50 percent of those deploying did opt for the shots.

"The anthrax vaccine is safe; it is effective for all forms of anthrax spore exposure," Winkenwerder said. "Time and again this vaccine has been looked at by experts,...and each time the conclusion is the vaccine is safe and it is effective."

The assistant secretary said the anthrax threat is still out there. "Our adversaries continue to remind us that

they are determined to obtain nuclear, chemical and biological weapons," he said. "We do not yet know who perpetrated the attacks of October 2001." In that incident, letters filled with anthrax spores killed five, sickened 17 and contaminated the Hart Senate Office Building so badly it was months before the building was deemed safe.

It's important to make the vaccination program mandatory, Winkenwerder said. "There is a signal sent if a program is voluntary that perhaps it is just not that important," he said. "Our actual view is that it is very important. We believe it should be mandatory, because we want to protect every person to the maximum degree possible who might be a target."

While the program is mandatory for those deploying to threat areas, the program will be voluntary for service members and civilians who started their vaccine series but had to stop because of the judge's order. "If they wish to continue with their vaccine series, we will make it available," Winkenwerder said.

Research continues on the anthrax vaccine. The assistant secretary said DoD is looking at studies conducted with the Centers for Disease Control that may allow the department to reduce the number of shots from six to five or even four. "We don't have FDA concurrence or approval for that yet," he said.

There is no shortage of the vaccine, Winkenwerder said.

Corpsmen Earn Respect, Title 'Doc'

By Pfc. Corey A. Blodgett, Marine Corps Base Camp Butler

EAST FUJI MANEUVER AREA, Japan - They stay in the field, eat meals ready to eat, sleep on the ground, wake up before dawn and wear the eagle, globe and anchor - they're Navy Hospital Corpsmen.

When artillery batteries from Marine bases in California, North Carolina and Hawaii deployed to Okinawa on the Marine Corps' Unit Deployment Program, they took all essential equipment and personnel. That, of course, includes those vital corpsmen - the men tasked with providing medical care to Marines wherever duty calls them, no matter how undesirable or grave the conditions.

Be it the battlefields of Iraq and Afghanistan or a less treacherous training deployment to the East Fuji Maneuver Area on mainland Japan, field corpsmen carry on a proud naval tradition of blurring the distinction between blue and green.

But it's not easy being green, and the rapport between Marines and corpsmen isn't automatic. Maybe that's why most Navy "docs" go above and beyond their duties to show their devotion to the Marines under their care.

"I try to do more than just what a corpsman is supposed to do," said Hospital Corpsman Adam R. Crandall, with M Battery, 3rd Battalion, 11th Marine Regiment - one of three batteries that attached to 3rd Bn., 12th Marines, 3rd Marine Division, for the artillery relocation exercise in Fuji. "I'll get out there and help them do their job. I want to improve the lives of the Marines I'm working with any way possible. I can do that by lending someone my poncho or just sitting down and talking with them."

Corpsmen have served alongside Marines for more than 200 years, keeping them healthy, combat ready and, in many instances, alive. But the bond between Marine



EAST FUJI MANEUVER AREA, Japan - Hospital Corpsman 3rd Class Jason W. Andrews (left) checks up on Marines on the gun line. U.S. Marine Corps photo by Pfc. Corey A. Blodgett

and corpsmen goes further than necessity.

"The relationship between Marines and 'docs' is probably better than a Marine to a Marine," said Pfc. Daniel R. Grigsby, a field artillery cannoneer with M Battery. "I think the 'docs' are seen more as a friend. It's not like a fellow Marine

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Canadian Corpsman Trains Aboard Boxer

By Mass Communication Specialist
Joshua Valcarcel, USS Boxer Public
Affairs

USS BOXER, At Sea - Leading Seaman Michelle Verville, a Royal Canadian Navy medical technician from HMCS Ottawa (FFH 341), one of the assets of Boxer Expeditionary Strike Group (BOXESG), visited USS Boxer (LHD 4) to train with the ship's medical department, Oct. 5 - 10.

She flew over via helicopter from the Canadian frigate to tour Boxer's medical facilities, learn how Boxer responds to trauma and injuries, and observe how Boxer's medical team trains.

Verville is one of only two medical providers for Ottawa's crew of nearly 250 Sailors. Visiting Boxer gave her the opportunity to see how Boxer's medical staff provides healthcare for nearly 3,000 Sailors and Marines.

"I wanted to work with the staff here and see how different our training is," said Verville. "Even though the medicine is similar, we train quite differently."

Ottawa's medical training program is structured around a classroom setting, where Boxer uses on-

the-job training. While aboard Boxer, Verville observed multiple surgeries, assisted with daily patient care, and responded to a medical emergency.

"It was great working with Boxer Sailors and Marines to see how they do business here," said Verville. "I learned a lot from their experience and how they operate so effectively."

Because Boxer's medical facility is one of the largest in the U.S. Navy fleet, it has far more capabilities than Ottawa, such as a radiology department, operating rooms and laboratories. Verville was able to experience how extensive at-sea medicine can be.

Boxer and Ottawa, both operating in the U.S. 7th Fleet area of responsibility, know that they can play a vital role to aid humanitarian assistance operations, medical evacuations or combat medical support that would rely heavily on the medical capabilities of the Boxer strike group. Cross training Sailors from ship to ship helps ensure the success of the strike group should BOXESG have to respond to any medical scenario, according to Senior Chief Hospital Corpsman Steven Richardson, leading chief petty offi-



SOUTH CHINA SEA - HMCS Ottawa's (FFH 341) Leading Seaman Michelle Verville administers intravenous fluids to Sgt. Corey Schwendeman, assigned to the Command Element of the 15th Marine Expeditionary Unit (Special Operations Capable) deployed aboard USS Boxer (LHD 4). *U.S. Navy photo by Mass Communication Specialist Joshua Valcarcel*

cer of Boxer's Medical Department.

"Training is a necessary part of any evolution," said Richardson. "Anytime you work with another nation, it's important that we understand each other's capabilities, so in the event anything occurs we know where our assets are."

The cross training also fostered cooperation between the two allies which provided Verville and Boxer corpsmen a forum to learn about each other's navies and each other's culture.

'Fighting the Crud' continued...

(Continued from page 1)

ness, clearly impacting recruit training success and readiness.

"Two types of the pathogens - serotype-4 and serotype-7 - have a long, long history of making military recruits sick with fever, sore throat, cough, and sometimes upset stomachs and other symptoms," Russell said. "Recruits with adenoviral illness usually feel sick for three to 10 days, and this can impact their training."

Though very rare, complications from the illness such as severe pneumonia have resulted in death.

The goal of the trials is to replace oral vaccines that were given to U.S. military recruits from 1971 to early 1999. NHRC surveillance of the illness from 1996-2001 determined that the adenovirus illness was still a problem and thus a vaccine was still needed.

"Unfortunately, the only manufacturer of adenovirus vaccines stopped production in 1996, and the U.S. military had to work to find a new manufacturer when the last of the vaccine supply ran out in 1999," Russell said.

DoD has funded the company Barr/Duramed to be

the sponsor of the adenovirus vaccine trials and to eventually manufacture the vaccines.

Russell's Navy adenovirus vaccine trial staff is two active duty physicians, 11 full-time contractors and 110 part-time contractors. His team is working closely with the U.S. Army Medical Research and Materiel Command in Fort Detrick, Md., and researchers from the Walter Reed Army Institute of Research. The Army trials are being conducted at the Army Basic Combat Training Center in Fort Jackson, S.C.

NHR'C has a long history of successful research on respiratory infections, especially adenoviral infections, and NHRC houses the Navy Respiratory Disease Laboratory," Russell said, "making it the ideal partner with the Army research team."

"Approximately 4000 recruits will participate in these studies," he said. "Rigorous review and safeguards are in place to ensure that recruits who participate do so voluntarily and safely. More than 100 research professionals are working on these complex studies at each site because re-acquisition of safe and effective adenovirus vaccines is a very high priority for the U.S. military."

Essex Demonstrates Medical Readiness

By Senior Chief Mass Communication Specialist (SW/AW) Christina Johnson, USS Essex Public Affairs

ABOARD ESSEX, At Sea - USS Essex's (LHD 2) medical department was put to the test with numerous mass casualty drills during the Blue/Green workups with the embarked 31st Marine Expeditionary Unit (MEU) Oct. 9 and 10.

Essex is the Navy's only forward-deployed amphibious assault ship, but the ship has an additional, important role as a hospital ship – second only to the actual hospital ships USS Mercy (T-AH-19) and USS Comfort (T-AH-20).

"With each drill, we evaluate ourselves and try to find better ways to integrate our people into a team that can receive casualties, stabilize them and then provide definitive care or send them where they can receive that care," said Cmdr. Brett V. Sortor, Essex's Senior Medical Officer. "By integrating a Blue-Green medical team afloat, we learn better how to 'package' and 'receive' patients from one to another as an efficient team."

The ship has three operating

rooms, a 14-bed intensive care unit, a 45-bed ward, a radiology suite and a blood bank with more than 600 units of frozen blood.

Sorter additionally noted that the personnel assigned to the medical department are extremely talented.

"The personnel we have on board are as impressive as our equipment and capabilities," said Sortor. "We are fortunate to have corpsmen with experience in physical therapy, optometry and ultrasound technicians. Other corpsmen have spent time in the field with the Marines and they know combat casualty care."

"Bottom line, the Essex medical team has the skills, facilities and desire to provide the best care possible to our shipmates should the need ever arise," he added.

Essex is currently transiting to the Republic of the Philippines area of operation to participate in Amphibious Landing Exercise (PHIBLEX)/Talon Vison as part of the annual fall patrol.



PACIFIC OCEAN – The Medical Department team prioritize severely injured personnel to be taken down to medical during a Mass Casualty Drill aboard USS Essex (LHD 2) Oct. 9. U.S. Navy photo by Mass Communication Specialist Jhoan M. Montolio

Groundbreaking to Mark New Era in Military Healthcare Education Oct. 23 ceremony for new Academic Program Center furthers USU's mission to educate providers caring for those in harm's way

By Uniformed Services University of the Health Sciences Office of External Affairs

BETHESDA, Md. – On Oct. 23, U.S. Senators Daniel K. Inouye (D-HI), Barbara A. Mikulski (D-MD), Paul S. Sarbanes (D-MD) and Representative Chris Van Hollen (D-MD), along with Department of Defense Assistant Secretary for Health Affairs William Winkenwerder, Jr., M.D., other military leaders and dignitaries will help the Uniformed Services University of the Health Sciences (USHS) celebrate the groundbreaking of its new Academic Program Center.

USUHS's newest facility, the first to be constructed on campus since the school was built in 1978, will accommodate the growth in the

number of degree-granting programs offered by the university. The three-level structure will provide extra classrooms and faculty accommodations for USUHS' newest school, the Graduate School of Nursing, as well as Graduate Medical Education programs, and Continuing Health Education. The facility is expected to be completed within the next two years.

USUHS is the nation's only federal school of medicine and graduate school of nursing. The students are active-duty uniformed officers in the Army, Navy, Air Force and U.S. Public Health Service who are being educated to deal with wartime casualties, national disasters, emerging infectious diseases and other public health emergencies.

Many of the university's graduates are currently serving on the battlefields in Iraq and Afghanistan. Currently, the chief military medical officers serving in Afghanistan, Kuwait/Qatar, and the horn of Africa are USUHS alumni.

"The university is at the forefront of education and research in military medicine," said Charles L. Rice, M.D., USUHS president. "This new facility will provide space to allow the university to continue to fulfill its essential mission in educating men and women who are learning to care for those in harm's way."

For more information about USU, please visit the website at www.usuhs.mil.

Naval Hospital Bremerton Honors Red Cross Volunteers

By Douglas H. Stutz, Naval Hospital Bremerton Public Affairs

NAVAL HOSPITAL BREMER-TON – American Red Cross (ARC) hospital services volunteers were recognized for their timely commitments and many contributions with a appreciation ceremony on October 19, hosted by Capt. Catherine Wilson, Naval Hospital Bremerton (NHB) Commanding Officer.

"Our Red Cross volunteers contribute in ways we don't even realize," commented Wilson. "They touch our lives all over the world with their deeds and service. They are truly a force multiplier. They help make our facility a warm, gracious and inviting environment. So many of our beneficiaries and visitors mention the positive impact of our volunteers. I couldn't be more proud and thank them all from the bottom of my heart."

According to Julia Pickering, Navy commander (Ret.), Nurse Corps, and current hospital ARC chairperson, from Jan. to June 2006, the volunteers donated over 13,000 hours, which well exceed a six figure dollar amount in actualized labor dollars, especially considering that several of the volunteers are medical, dental and nurse providers.

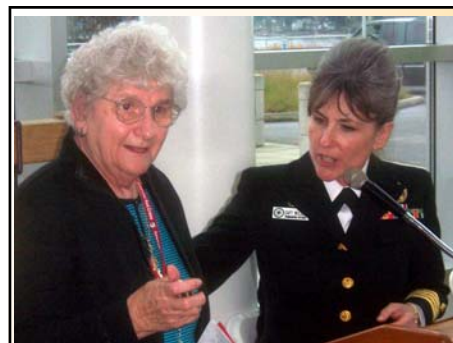
"Their faithful service makes my job a pleasure to fulfill," said Pickering, who worked in a ARC volunteer status for over 10 years. "I'm a Navy nurse, and the military is my life. I thoroughly enjoy being able to help out."

For the past three months, upwards of 54 volunteers have donated 3,394 hours of their time as doctors, nurses, outpatient and inpatient record assistants, patient advisors, customer service representatives, and varied departments such as health promotion, Dermatology, Pediatric, Orthopedic, Quality Management and Referral Management.

All volunteers must go through a thorough background check, interview, orientation, and if they are doctors and nurses, must show proof their credentials are up to date. They are then matched with suitable positions to their skills.

"We have Red Cross volunteers in almost every clinic in the hospital," said Lt. Cmdr. Patricia Taylor, Head, Population Health, and NHB liaison with the Red Cross. "So many of them put in a lot of hours to complete tasks that might not get done in such a timely manner."

Taylor states that the Red Cross volunteers do more than help to



NAVAL HOSPITAL BREMER-TON - Julia Pickering, Navy commander (ret.), Nurse Corps, and current chief of American Red Cross volunteer efforts at Naval Hospital Bremerton (NHB), is presented with a commanding officer's (CO) coin of excellence for her over 10 years of stellar volunteer service to the hospital by Capt. Catherine Wilson, NHB CO. *U.S. Navy photo by Douglas H. Stutz*

make up man-hours lost due to approximately 10-12 percent of NHB's staff being forward deployed overseas to support the on-going Global War on Terrorism effort. "They all add personality, energy and enthusiasm that are such a benefit for all of us," she said. "One aspect that stands out the most is that they are all dedicated to the positions they hold. A lot of them are retirees, and they enjoy being a vital part of the Navy/military family here."

Corpsmen Earn continued...

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where you're like, 'This is my colleague.' With the 'doc' it's, 'This is

the 'doc.' He's a cool guy."

But simply being "a cool guy" is not enough to earn Marines' trust and respect, according to Petty Officer 3rd Class Jason W. Andrews, a hospital corpsman with M Battery.

"All the Marines know me, trust me and will come to me for anything," said Petty Officer 3rd Class Jason W. Andrews, a hospital corpsman with M Battery. "But that trust comes with time. We have to prove that we're not going to lie to them, and that we'll treat them the way they deserve. If we treat the Marines well, they treat us well, but if we lie to them or don't hold our weight, they'll outcast us."

Corpsmen also earn respect by performing everyday Marine Corps duties in the field, such as digging trenches and providing security at night. "The 'docs' are treated as Marines whether they like it or not," said Lance Cpl. Anthony M. Leone, a towed artillery systems technician with F Battery, 2nd Bn., 10th Marines. "But it's like they're Marines anyway. We're close to each other, if anyone has a problem they can take it to the 'docs.'"

"Corpsmen, when attached to Marine units aren't considered Navy," Leone said. "They're Marines."



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